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## SOCIAL CARE & HEALTH SERVICES

Older People's Commissioner for  
Wales  
Cambrian Buildings  
Mount Stuart Square  
Cardiff  
CF10 5FL

Date:/Dyddiad

30 January 2015

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Simon Burch

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Dear Commissioner

### **Required Actions – “A Place to Call Home?” – Care Home Review**

Please find enclosed our response to the Actions you require assurance on by Monmouthshire County Council.

We are committed to improving the quality of life for our older citizens and to the principle of being guided by ‘what matters’ to them. To achieve this we are actively looking for ways to hear the voice of residents and to improve the quality of care through effective collaboration with our partner agencies and providers.

We welcome the focus on this vital area that has resulted from your investigation and report and we share your concern about the status and funding of the care home sector. In order to improve the sector we would wish to highlight the following key issues in addition to the response in the attached proforma:

- Adequate funding of the care home sector to ensure a vibrant market that attracts excellent providers.
- A focus on workforce to ensure high quality relationship based care.
- A focus on outcomes and hearing the voice of residents, rather than bureaucratic processes.
- A proportionate approach to regulation so that commissioners and providers can focus on the above and not divert too much energy from commissioning and providing person focussed care.
- An emphasis on the human rights of residents in care homes and the need to engage residents meaningfully in the lives of their local communities.

Whilst we have provided assurance against all the Required Actions, we do feel that there would be merit in clarifying against each of these who exactly is responsible for implementing the actions, who will monitor and who will report progress.

*Simon Burch, Chief Officer, Social Care & Health Services*  
Monmouthshire County Council, @Innovation House, Wales 1 Business Park, Magor,  
Monmouthshire, NP26 3DG

We would welcome further conversations with you and look forward to taking forward this important dialogue. If you have queries about our formal response on assurances, would you please contact, in the first instance, Chris Robinson, Lead Commissioner – Quality Assurance, [chrisrobinson@monmouthshire.gov.uk](mailto:chrisrobinson@monmouthshire.gov.uk).

Yours sincerely



Simon Burch  
Chief Officer Social Care and Health

Encl: Response to Required Actions

**Care and Nursing Home overall assurances**

We have circulated an Assurance Certificate template to all our Care and Nursing home providers seeking their assurances with respect to the appropriate required actions. The responses we have received demonstrate that our providers either already comply or are willing to work towards compliance.

Registered homes are required to submit an annual quality report to CSSIW. We will be working with our homes to ensure that these reports and their annual quality self-assessments provide the evidence that will inform the Chief Officer for Social Care and Health annual quality statement. (see comment under 6.7)

**1.6: Older people are offered independent advocacy in the following circumstances:**

- When an older person is at risk of, or experiencing, physical, emotional, financial or sexual abuse.
- When a care home is closing or an older person is moving because their care needs have changed.
- When an older person needs support to help them leave hospital

**For those with fluctuating capacity or communication difficulties, this should be non-instructed advocacy.**

**When a care home is in escalating concerns, residents must have access to non-instructed advocacy.**

**April 2015**

Our providers affirm that advocacy services are available to residents when safeguarding issues arise. However, there are providers that need to ensure that this availability is made clearer in the literature provided to residents and potential residents.

At this time we are still clarifying the responsibilities associated with arranging advocacy, where necessary, when a resident is leaving hospital. This will be raised as a matter for clarification and resolution in our next Care Home Providers' Forum in which we will involve the Health Board.

Awareness of availability of advocacy services will be included in the conversation checklist that monitoring officers use when consulting with residents. Evidence and information about advocacy services will be included in the annual quality self-assessment completed by providers.

Arrangements have been made so that advocacy services are available to residents in a current escalating concerns situation, and these would be available to meet all future requirements.

**2.2 Older people in care homes have access to specialist services and, where appropriate, multidisciplinary care that is designed to support rehabilitation after a period of ill health**  
**July 2015**

Where residents require specialist services which are health related these remain within the purview of the health board. In addition to this the Authority has adopted an integrated approach to its provision of care services. This multi-disciplinary approach makes it easier for care homes to access specialist and multi-disciplinary services. We are committed to developing and improving this partnership approach

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**3.2 All care home employees undertake basic dementia training as part of their induction and all care staff and care home managers undertake further dementia training on an on-going basis as part of their skills and competency development, with this specific element of supervision and performance assessment**

**January 2016**

Our providers have provided assurance that appropriate training arrangements are already in place – meeting the induction and on-going development requirements. Already there is a programme of dementia training for our in-house services that addresses this requirement

However, there are action plans in place that will address weaknesses in the current supervision and performance assessments.

Performance in this area will be validated during monitoring visits to the homes. Further, providers will be required to assess their performance against these requirements in the annual quality self-assessment process. A new template is being developed to incorporate these criteria.

**3.3 Active steps should be taken to encourage the use of befriending schemes within care homes, including intergenerational projects, and support residents to retain existing friendships. This must include ensuring continued access to faith based support and to specific cultural communities.**

**November 2015**

Almost universally our providers assess themselves as being compliant with supporting residents retain existing friendships and ensuring access to faith based support and cultural communities where appropriate. As with all the Required Actions, our contract monitoring processes will be including validation of these self-assessments.

However, whilst some services are actively involved with encouraging befriending or 'friends of...'  
Schemes, others have identified the need to progress these and intergenerational projects. The Authority will encourage these initiatives and the best practice within them, via the Care Home Forum meetings. Further, as our Community Connections initiative progresses, the opportunities for linkages to be created between residents in homes and 'friends' within the community will be developed.

Further, our Supporting People Programme Grant funded services is conducting an option appraisal into supporting befriending services across the County. The intention is to have a project proposal available as and when any SPPG under-spending or new funding becomes available.

As part of our planned/routine contract monitoring, we will review providers' progress in respect of this requirement.

**5.6 A National Improvement Service is established to improve care homes where Local Authorities, Health Boards and CSSIW have identified significant and/or on-going risk factors concerning the quality of life or care provided to the residents and/or potential breaches of their human rights.**

**The national improvement team should utilise skills of experienced Care Home Managers as well as other practitioners, to provide intensive and transformational support to drive up**

**standards of quality of life and care for residents as well as to prevent and mitigate future safeguarding risks.**

**This service should also develop a range of resources and training material to assist homes that wish to improve in self-development and on-going improvement**  
**September 2016**

The creation of the National Framework Service will build on much of the collaborative working that is already being undertaken between the Authority, the Health Board and CSSIW – as evidenced in our recent joint management of an escalating concerns situation in which we have worked very effectively together, recognising the role, powers and strengths of each agency.

The Authority would support the creation of this service and looks forward to being involved, much as it has done in the development of a common provider quality self-assessment procedure with the Health Board and CSSIW – which will hopefully be piloted in Monmouthshire in 2015/16.

**6.2 Care home providers, Commissioners and CSSIW should develop informal and systematic ways in which to ensure that they better understand the quality of life of older people, through listening to them directly (outside of formal complaints) and ensuring issues they raise are acted upon.**

**Annual reporting should be undertaken of how on-going feedback from older people has been used to drive continuous improvement.**  
**April 2015**

The Authority's approach to all the processes involved with providing care is based on 'what matters to the person'. This approach involves discussions and listening to older people and converting their needs and aspirations into meaningful outcomes.

At the same time, a new quality assurance framework is being developed which is also based on assessing the impact of the services on the service user. Again, fundamental to this approach is talking with older service users to understand the quality of the service from their perspective.

In conjunction with CSSIW, the Authority has been encouraging care home providers to include descriptions of how their service will achieve person-centred outcomes in their Statements of purpose and other literature that is available to potential residents.

Central to our new approach to quality assurance is the need to collate, analyse and act upon information that social workers report when they have met with a resident and reviewed their services. A Professional Feedback App has been developed to collate this feedback which is then used to focus monitoring visits. As the use of the App has developed, our ability to act more proactively in services where quality is deteriorating has improved and this quality intelligence will enable us to create a more effective linkage with CSSIW. Ensuring that the residents' feedback is fully utilised to improve services is an on-going commitment of the Authority and methodologies for collating their feedback more effectively are being developed.

Our providers assure us that they are compliant with this requirement. However, some have identified the need to increase their efforts in this area and the Authority will be using the annual self-assessment of services to collate evidence that discussions with residents, their families and/or advocates do actually lead to service improvements.

**6.7 Annual Quality Statements are published by the Director of Social Services in respect of the quality of life and care of older people living in commissioned and Local Authority run care homes: This should include:**

- **The availability of independent advocacy in care homes**
- **Quality of life and care of older people, including specific reference to older people living with dementia and/or sensory loss.**
- **How human rights of older people are upheld in care homes across the Local Authority**
- **The views of older people, advocates and lay assessors about the quality of life and care provided in care homes.**
- **Geographic location of care homes.**

**September 2015**

We support this in principle but believe that this requirement needs further discussion and clarification; especially in considering CSSIW's responsibility to regulate and assure the quality of care within care homes and avoid duplication or the potential for conflicting assessments. We would welcome the Commissioner's view in this regard.

The range and scope of the human rights considerations also requires some clarification. Presumably the two most relevant issues are Deprivation of Liberty and the implications of Article 14 on those with assets above the threshold limit. It may be that the Commissioner has in mind a wider assessment, and it is this that needs to be clarified.

Our comments on this requirement suggest that across the whole range of required actions, it would be helpful under each action for the agency with responsibility to take action, monitor progress and reporting be clearly and separately identified.

We are also concerned that this is proportionate and of genuine value to older people; this requires further consideration to identify a level of detail which is useful, does not duplicate other processes and does not divert staff from their focus on the improvement agenda in homes.